

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

What A Country! PAC

ADDRESS (number and street)

824 S Milledge Ave Ste 101

Check if different
than previously
reported. (ACC)

Athens

GA

30605

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00571646

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☒ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
01 01 2018

through

M M M / D D D / Y Y Y Y Y Y
01 31 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Kilgore, Paul, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Kilgore, Paul, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
02 14 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

What A Country! PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y
01 / 31 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2018		42044.06
(b) Cash on Hand at Beginning of Reporting Period.....	42044.06	
(c) Total Receipts (from Line 19)	24250.00	24250.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	66294.06	66294.06
7. Total Disbursements (from Line 31).....	60757.54	60757.54
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	5536.52	5536.52
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

What A Country! PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	8

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	21750.00	21750.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	21750.00	21750.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	2500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	24250.00	24250.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	24250.00	24250.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	24250.00	24250.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	59757.54	59757.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	59757.54	59757.54
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	1000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	60757.54	60757.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	60757.54	60757.54

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	24250.00	24250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24250.00	24250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	59757.54	59757.54
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	59757.54	59757.54

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Beyond Broadway, LLC

Mailing Address 4701 Marion St Ste 100

City
DenverState
COZip Code
80216FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2018

Transaction ID : SA11AI.5522

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Partnership Attribution Requested

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brzysko, Stanley, , ,

Mailing Address 1512 Castle Wall St

City
Las VegasState
NVZip Code
89117FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2018

Transaction ID : SA11AI.5532

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cummings, Nycole, , ,

Mailing Address 6259 Orto Vaso Ave

City
Las VegasState
NVZip Code
89131FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Core Management ServicesOccupation (for Individual)
Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2018

Transaction ID : SA11AI.5540

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 24

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Devore, Thomas, J, ,

Mailing Address 2283 Coral Ridge Ave

City
Henderson

State
NV

Zip Code
89052

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Core Management Services

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
01 / 30 / 2018

Transaction ID : SA11AI.5538

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Greenspun, Brian, L, ,

Mailing Address 901 N Green Valley Pkwy Ste 210

City
Henderson

State
NV

Zip Code
89074

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
01 / 30 / 2018

Transaction ID : SA11AI.5526

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jolley, Andrew, M, ,

Mailing Address 628 Coriander Canyon Ct

City
Las Vegas

State
NV

Zip Code
89138

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
01 / 30 / 2018

Transaction ID : SA11AI.5524

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Information Requested

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Laub, John, , ,

Mailing Address 9501 Royal Windsor Ave

City

Las Vegas

State

NV

Zip Code

89149

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Las Vegas Medical Assoc.

Occupation (for Individual)

Executive

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 25 / 2018

Transaction ID : SA11AI.5549

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LVR Productions, LLC

Mailing Address 500 S 4th St

City

Las Vegas

State

NV

Zip Code

89101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2018

Transaction ID : SA11AI.5542

Amount of Each Receipt this Period

500.00

☐ Memo Item

Partnership Attribution Requested

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Richardson, Michael, , ,

Mailing Address 1626 Cole Blvd Ste 310

City

Golden

State

CO

Zip Code

80401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Summit Peak Credit

Occupation (for Individual)

Mortgage Banker

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 25 / 2018

Transaction ID : SA11AI.5547

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ritter, John, A, ,

Mailing Address 1635 Village Center Cir Ste 100

City
Las Vegas

State
NV

Zip Code
89134

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
01 / 30 / 2018

Transaction ID : SA11AI.5530

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ryan, Thomas, F, ,

Mailing Address 712 Ocean Dr

City
Juno Beach

State
FL

Zip Code
33408

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Barton & Associates

Occupation (for Individual)
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
01 / 25 / 2018

Transaction ID : SA11AI.5545

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Snyder, Carla, J, ,

Mailing Address 4071 Via Montagna St

City
Las Vegas

State
NV

Zip Code
89129

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
01 / 30 / 2018

Transaction ID : SA11AI.5536

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Thomas, David, V, ,

Mailing Address 8713 Castle Ridge Ave

City
Las Vegas

State
NV

Zip Code
89129

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2018

Transaction ID : SA11AI.5528

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Westrom, Lynn, H, ,

Mailing Address 8575 W Washburn Rd

City
Las Vegas

State
NV

Zip Code
89149

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self Employed

Occupation (for Individual)
Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2018

Transaction ID : SA11AI.5534

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3000.00

21750.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 24
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City
WASHINGTON

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C

C00194746

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 18 / 2018

Transaction ID : SA11C.5511

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

2500.00

TOTAL This Period (last page this line number only)..... ►

2500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name (Last, First, Middle Initial)

A. 5000 Role Models of Excellence Project

Mailing Address 1450 NE 2nd Ave, Suite 227

City
MiamiState
FLZip Code
33132Purpose of Disbursement
PAC Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	2			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5593**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Anedot

Mailing Address PO Box 84314

City
Baton RougeState
LAZip Code
70884Purpose of Disbursement
PAC CC Transaction Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	5			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5544**

Amount of Each Disbursement this Period

220.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chase Card Services

Mailing Address PO Box 15153

City
WilmingtonState
DEZip Code
19886Purpose of Disbursement
See Memo Entries

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5555**

Amount of Each Disbursement this Period

5854.67

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6575.57

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name (Last, First, Middle Initial)

A. Holiday InnMailing Address 3 Ravinia Dr NE
#100City
AtlantaState
GAZip Code
30346Purpose of Disbursement
PAC Lodging

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5555.1**

Amount of Each Disbursement this Period

626.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Holiday InnMailing Address 3 Ravinia Dr NE
#100City
AtlantaState
GAZip Code
30346Purpose of Disbursement
PAC Lodging

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5555.1**

Amount of Each Disbursement this Period

309.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Far Niente Winery

Mailing Address 1350 Acacia Dr

City
OakvilleState
CAZip Code
94562Purpose of Disbursement
PAC Event Catering

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5555.1**

Amount of Each Disbursement this Period

1786.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name (Last, First, Middle Initial)

A. Capitol Hill Suites

Mailing Address 1730 Rhode Island Ave NW

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
PAC Meeting Expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5555.1**

Amount of Each Disbursement this Period

445.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 3200 E Airfield Dr

City
DFWState
TXZip Code
75261Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5555.4**

Amount of Each Disbursement this Period

444.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 3200 E Airfield Dr

City
DFWState
TXZip Code
75261Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5555.**

Amount of Each Disbursement this Period

317.20

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 3200 E Airfield Dr

City
DFWState
TXZip Code
75261Purpose of Disbursement
PAC Airfare

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5555.4**

Amount of Each Disbursement this Period

317.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Southwest

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235Purpose of Disbursement
PAC Airfare

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5555.7**

Amount of Each Disbursement this Period

362.96

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Republican Jewish CoalitionMailing Address 50 F Street NW
Ste 100City
WashingtonState
DCZip Code
20001Purpose of Disbursement
PAC Event Tickets

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5555.**

Amount of Each Disbursement this Period

1000.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0	0	0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name (Last, First, Middle Initial)

A. Andaz Fifth Avenue

Mailing Address 485 5th Ave

City
New YorkState
NYZip Code
10017Purpose of Disbursement
PAC Meeting Expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5555.**

Amount of Each Disbursement this Period

204.02

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Chase Card Services

Mailing Address PO Box 15153

City
WilmingtonState
DEZip Code
19886Purpose of Disbursement
See Memo Entries

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5574**

Amount of Each Disbursement this Period

7808.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 3200 E Airfield Dr

City
DFWState
TXZip Code
75261Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5574.**

Amount of Each Disbursement this Period

290.30

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7808.70

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name (Last, First, Middle Initial)

A. Congressional InstituteMailing Address 1700 Diagonal Rd
#730City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
PAC Event Tickets

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5574.1**

Amount of Each Disbursement this Period

1118.84

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 3200 E Airfield Dr

City
DFWState
TXZip Code
75261Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5574.3**

Amount of Each Disbursement this Period

287.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 3200 E Airfield Dr

City
DFWState
TXZip Code
75261Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5574.**

Amount of Each Disbursement this Period

301.40

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0	0	0	0	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 3200 E Airfield Dr

City
DFWState
TXZip Code
75261Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5574.!**

Amount of Each Disbursement this Period

301.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Professional Data ServicesMailing Address 824 S Milledge Ave
Ste 101City
AthensState
GAZip Code
30605Purpose of Disbursement
PAC Compliance Consulting

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5584**

Amount of Each Disbursement this Period

501.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Rapanos, Nicole, , ,

Mailing Address 23077 Bluegill Ln

City
Cudjoe KeyState
FLZip Code
33042Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	8			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5515**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3	5	0	1	.	8	4
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name (Last, First, Middle Initial)

A. Schultheis, Roy, M, ,Mailing Address 1904 Vermont Ave NW
Unit ACity
WashingtonState
DCZip Code
20001Purpose of Disbursement
See Memo Entries

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5595**

Amount of Each Disbursement this Period

704.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Virgin Airlines

Mailing Address 555 Airport Blvd #500

City
BurlingameState
CAZip Code
94010Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5595.c**

Amount of Each Disbursement this Period

388.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Virgin Airlines

Mailing Address 555 Airport Blvd #500

City
BurlingameState
CAZip Code
94010Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5595.**

Amount of Each Disbursement this Period

40.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

704.47

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 3200 E Airfield Dr

City
DFWState
TXZip Code
75261Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		0	9		2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5595.;**

Amount of Each Disbursement this Period

102.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Schultheis, Roy, M, ,Mailing Address 1904 Vermont Ave NW
Unit ACity
WashingtonState
DCZip Code
20001Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		1	8		2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5514**

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Schultheis, Roy, M, ,Mailing Address 1904 Vermont Ave NW
Unit ACity
WashingtonState
DCZip Code
20001Purpose of Disbursement
See Memo Entries

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		3	1		2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5610**

Amount of Each Disbursement this Period

1451.96

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5451.96

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 3200 E Airfield Dr

City
DFWState
TXZip Code
75261Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5610.1**

Amount of Each Disbursement this Period

330.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 3200 E Airfield Dr

City
DFWState
TXZip Code
75261Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5610.1**

Amount of Each Disbursement this Period

320.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Marriott

Mailing Address 10400 Fernwood Rd

City
BethesdaState
DEZip Code
20817Purpose of Disbursement
PAC Lodging

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5610.1**

Amount of Each Disbursement this Period

458.14

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name (Last, First, Middle Initial)

A. Sheraton

Mailing Address One StarPoint

City
StamfordState
CTZip Code
06902Purpose of Disbursement
PAC Lodging

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.5610.4

Amount of Each Disbursement this Period

299.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Solari Communications

Mailing Address 5139 SW 71 Place

City
MiamiState
FLZip Code
33155Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.5583

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Solari Communications

Mailing Address 5139 SW 71 Place

City
MiamiState
FLZip Code
33155Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.5589

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

17500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name (Last, First, Middle Initial)

A. The Oorbeek Group

Mailing Address 5614 Garnetts Farm Drive

City
HaymarketState
VAZip Code
20159Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		22		2018

FEC Identification Number

C**Transaction ID : SB21B.5586**

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Oorbeek Group

Mailing Address 5614 Garnetts Farm Drive

City
HaymarketState
VAZip Code
20159Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		23		2018

FEC Identification Number

C**Transaction ID : SB21B.5608**

Amount of Each Disbursement this Period

12750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Oorbeek Group

Mailing Address 5614 Garnetts Farm Drive

City
HaymarketState
VAZip Code
20159Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2018

FEC Identification Number

C**Transaction ID : SB21B.5587**

Amount of Each Disbursement this Period

1450.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

18200.00

59742.54

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 24

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

What A Country! PAC

Full Name (Last, First, Middle Initial)

A. Kristi For Governor

Mailing Address PO Box 527

City
Sioux FallsState
SDZip Code
57101Purpose of Disbursement
Contribution (State/Local Committee)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		23		2018

FEC Identification Number

C**Transaction ID : SB23.5591**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00

1000.00